

DOCKET NO. IA00010

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Date: November 21, 2003
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From: Kevin D. Wills - 43,993
Subject: 09/943,921- Jurgen Reinold et al. IA00010

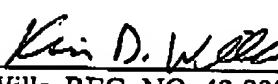
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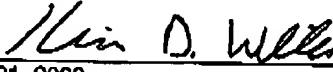
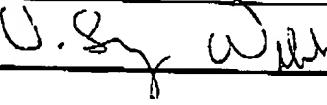
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MAIL STOP: NON-FEE AMENDMENT
EXAMINER: Ajit Patel
GROUP ART UNIT: 2664
SERIAL NO.: 09/943,921
FILED: AUGUST 31, 2001
INVENTOR: JURGEN REINOLD ET AL.



Kevin D. Wills, REG. NO. 43,993

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TRANSMITTAL FORM		Application Number	09/943,921		
		Filing Date	August 31, 2001		
		First Named Inventor	Jurgen Reinold et al.		
		Group Art Unit	2684		
		Examiner Name	Ajit Patel		
Total Number of Pages in this Submission	16	Attorney Docket Number	IA00010		
ENCLOSURES		(check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs			
		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input checked="" type="checkbox"/> Affidavit Pursuant to 37 CFR 1.132			
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